CALIFORNIA RETAIL FOOD CODE -
SUMMARY OF MAJOR CHANGES

On May 15, 2006, the Governor signed into law SB 144 (Runner) which enacted the California Retail Food Code (CalCode).

This new law which completely replaces the California Uniform Retail Food Facilities Law (CURFFL), represents a culmination of an extraordinary collaborative effort of the California Retail Food Safety Coalition (CRFSC) – a broad-based coalition of federal, state and local regulators and the retail food industry. Cal Code is modeled on the federal Model Food Code (2001 version) which represents the best available science in the overall goal of preventing foodborne illness.

With the enactment of Cal Code, local enforcement agencies are refocusing their food facility inspections with emphasis on the Centers for Disease Control and Prevention's (CDC) identified foodborne illness risk factors and public health interventions. CalCode is intended to create uniformity and consistency throughout California.

<table>
<thead>
<tr>
<th>The foodborne illness risk factors are:</th>
<th>The public health interventions are:</th>
</tr>
</thead>
<tbody>
<tr>
<td>♦ Food from Unsafe Sources</td>
<td>♦ Demonstration of Knowledge</td>
</tr>
<tr>
<td>♦ Inadequate Cooking</td>
<td>♦ Employee Health</td>
</tr>
<tr>
<td>♦ Improper Holding Temperatures</td>
<td>♦ Time/Temperature Control</td>
</tr>
<tr>
<td>♦ Contaminated Equipment</td>
<td>♦ Hands as a Vehicle of Contamination</td>
</tr>
<tr>
<td>♦ Poor Personal Hygiene</td>
<td>♦ Consumer Advisory</td>
</tr>
</tbody>
</table>

These risk factors are consistent with CalCode Section 113725. This section requires that local enforcement agencies identify on their inspection reports those violations that are considered major. Major violations are traditionally looked upon as rationale for suspension of a food facility permit due to an imminent health hazard. A summary of the major violations is included for reference in this document.

So what’s new in Cal Code?

The following is a summary of the most significant changes or new requirements found in CalCode. This summary is not all inclusive. It is recommended that each permit holder review all of the requirements in code.

There have been a few minor changes in terminology:
- Dishwashing is now called “warewashing”
- Bulk food containers are now known as “Working Containers”
- A wiping rag has become a “Wiping Cloth”
- Customer utensils are now referred to as “Tableware”
- Owner/Operator is referred to as “Permit Holder”
- Wiping Cloths are linens BUT linens are not “Wiping Cloths”
Changes or new requirements that address risk factors or public health interventions:

- **Demonstration of Knowledge (Section 113947)**
  o Applicable to assigned duties – all food employees are required to have adequate knowledge in food safety as it relates to their assigned duties.
  o Focus will be on risk factor violations: temperatures, handwashing, warewashing.

- **Food Safety Certification (Section 113947.1-113947.6)**
  o Food safety certification will be valid for 5 years instead of 3 years from date of issuance.
  o Certifying organization must be accredited by the American National Standards Institute.
    List of current accredited exam providers available on Conference for Food Protection website: www.foodprotect.org

- **Employee Health (Sections 113949-113950.5, 113974)**
  o All food employees are required to have knowledge regarding the relationship between personal hygiene and food safety and food employee health.
  o Reportable Illnesses have been expanded to include the following:
    - Salmonella typhi and Salmonella spp.
    - Hepatitis A virus
    - Shigella spp.
    - E. coli (Enterohemorrhagic or shiga toxin producing Escherichia coli)
    - Norovirus
    - Entamoeba histolytica (applicable only to CA)
  o Employee must report to the Person In Charge (PIC) if they have been diagnosed with one of the reportable illnesses or if they have a lesion or wound that is open or draining and comply with restrictions and exclusions.
  o PIC must report to the local enforcement agency if a food employee has been diagnosed with a reportable illness or if they have knowledge that two or more food employees are experiencing symptoms of an acute gastrointestinal illness.
  o PIC must exclude a food employee if diagnosed with a reportable illness or restrict a food employee if suffering from symptoms of an acute gastrointestinal illness. Exclude means to prevent a person from working as a food employee or entering a food facility except for those areas open to the general public. Exclusions can only be removed by the local health officer/enforcement agency.
  o PIC must restrict a food employee if they are experiencing persistent coughing or sneezing. Restrict means to limit the activities of a food employee so that there is no risk of transmitting a disease that is transmissible through food and the food employee does not work with exposed food, clean equipment, utensils, linen and unwrapped single-use articles.
  o PIC is required to ensure that lesions or open wounds on food employees are protected.

- **Handwashing (Section 113953.3)**
  o Food employees are required to wash their hands with cleanser and warm water by vigorously rubbing their lathered hands and arms for at least 10 to 15 seconds and rinsing with clean running water followed by drying of cleaned hands.

- **Hot and cold holding temperatures (Section 113996, 113998, 114037, 114343)**
  o Exceptions previously in CURFFL remain in effect.
  o The term "diligent" has been eliminated. Food may be removed from specified holding temperatures for up to two hours during food preparation.
• Cooking of raw animal foods and plant food (Section 114004, 114008, 114010)
  o Cooking temperatures have been expanded.

<table>
<thead>
<tr>
<th>Food Item</th>
<th>Cooking Temperature (for 15 sec)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fruits &amp; vegetables for hot holding</td>
<td>135°F</td>
</tr>
<tr>
<td>Shell eggs for immediate service, fish, single pieces of meat</td>
<td>145°F</td>
</tr>
<tr>
<td>Comminuted meat, injected meats, raw eggs for later service</td>
<td>155°F</td>
</tr>
<tr>
<td>Poultry, stuffed items (fish, meat, poultry, pasta), stuffing containing fish, meat, poultry, ratites</td>
<td>165°F</td>
</tr>
</tbody>
</table>

  o Charts for roasts have been included in CalCode.

• Food contact surfaces – cleaned and sanitized (Section 114099.6, 114117)
  o Wash sink compartment water must be at 110°F during the warewashing process.
  o Food contact surfaces in a refrigerated room shall be cleaned at a frequency that corresponds to the temperature in the following chart and this information shall be documented for review by the LEA.

<table>
<thead>
<tr>
<th>Temperature</th>
<th>Cleaning Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>41°F or less</td>
<td>24 hours</td>
</tr>
<tr>
<td>&gt;41°F - 45°F</td>
<td>20 hours</td>
</tr>
<tr>
<td>&gt;45°F - 50°F</td>
<td>15 hours</td>
</tr>
<tr>
<td>&gt;50°F - 55°F</td>
<td>10 hours</td>
</tr>
</tbody>
</table>

• Shellfish tag retention (Section 114039-114039.5)
  o Shellstock tags must be maintained in chronological order correlated to the date or dates the shellstock are sold or served and held for 90 days.

• HACCP Plans and Variances (Section 114057, 114057.1, 114417.6)
  o HACCP Plans approved by the Department are required for food facilities that conduct any of the following activities:
    - Package potentially hazardous foods products using a reduced-oxygen packaging (ROP) method.
    - Using acidification or water activity as a means to prevent the growth of Clostridium botulinum
  o Variances can be requested through the Department to allow the use of an alternative practice or procedure for the following circumstances: employee hygiene, protection of food contamination, time as a public health control, cooling, cooking and reheating temperatures for PHF, raw shell eggs in food that is not thoroughly cooked, thawing, receiving temperatures, reduced-oxygen packaging of PHF and for sanitization methods for food and non-food contact surfaces.

• Licensed health care facilities/public & private schools; prohibited foods not offered (Section 114000, 114091)
  o Time as a public health control can not be used for raw eggs in licensed health care facilities or in public and private school cafeterias.
  o Only pasteurized juice, pasteurized fluid and dry milk and milk products may be served.
  o Pasteurized shell eggs or pasteurized liquid, frozen, or dry eggs or egg products shall be substituted for raw shell eggs in the preparation of foods, unless raw eggs are combined immediately before cooking for one consumer's serving at a single meal and served immediately, or raw eggs are combined as an ingredient immediately before baking.

Page 3 of 5
• Hot and Cold Water available (Sections 113953 (c), 114099.2 (b), 114101 (a), 114163 (a), 114189, 114192, 114192.1, 114195)
  o Hot water must be available at 120 °F in the food facility.
  o Warm water is defined as 100 °F.

<table>
<thead>
<tr>
<th>Use</th>
<th>Minimum Temperature Required (measured at the faucet)</th>
<th>Major Violation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hand washing</td>
<td>100 °F</td>
<td>Below 110 °F</td>
</tr>
<tr>
<td>Utensil Washing</td>
<td>110 °F</td>
<td>Anything less than manufacturer’s specifications</td>
</tr>
<tr>
<td>Dish washing Machine</td>
<td>Per Manufacturer’s Specifications</td>
<td>Anything less than manufacturer’s specifications</td>
</tr>
</tbody>
</table>

Changes or new requirements that address Good Retail Practices:

• Food must be transported in a manner that prevents contamination and that maintains food at proper temperatures (exception: deliveries < 30 minutes) (§113982)
• All raw produce is required to be washed prior to being cut, combined with other ingredients, cooked or served or offered for human consumption in ready-to-eat form. (§113992)
• Pressurized beverage containers, cased food in waterproof containers, such as bottles or cans, and milk containers in plastic crates may be stored on a floor that is clean and not exposed to moisture. (§114047d)
• Tableware that is preset shall be protected from contamination by being wrapped, covered or inverted. Exposed, unused settings shall be removed when a consumer is seated. (§114074)
• Prepackaged food must comply with the Food Allergen Labeling and Consumer Protection Act of 2004, requires any food containing one of the eight major food allergens (milk, egg, fish, crustacean shellfish, wheat, soybeans, peanuts and tree nuts) be identified on the label. (§114089)
• Prohibits concealing or altering manufacturer’s dating information on foods. (§114090)
• Ventilation exemptions will no longer be issued by the Department. The local enforcement agency may evaluate requests for any exemptions. (§114149.1)
• Molluscan shellfish tanks must be operated pursuant to a HACCP plan. (§114155)
• Hot and cold holding equipment must be designed to include and be equipped with a temperature measuring device. This does not apply to equipment for which the placement of a temperature measuring device is not a practical means for measuring ambient air temperature surrounding the food. (§114157)
• Food facilities constructed or remodeled after July 1, 2007, shall be required to provide a food preparation sink for the washing, soaking, thawing or similar preparation of foods. (§114163)
• All pressurized cylinders shall be securely fastened to a rigid structure. (§114172)
• As of July 1, 2007, all fogging devices installed shall use a reservoir for holding water for fogging. Cleaning shall be in accordance with the manufacturer’s specifications or at least once a week. (§114180)
Summary of Major Violations:

Major violations require immediate corrective action or suitable alternatives until the violations are corrected. When a major violation cannot be immediately corrected, or a suitable alternative found, the food facility may be subject to closure of the impacted areas until the violation is corrected.

<table>
<thead>
<tr>
<th>Description of Data Field</th>
<th>Cal Code Section</th>
<th>Major Violation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Health</td>
<td>113949-113950.5, 113974</td>
<td>Failure to report or comply with exclusions or restrictions as required in these sections would result in a major violation.</td>
</tr>
<tr>
<td>No discharge from eyes, nose and mouth</td>
<td>113974</td>
<td>Any violation of this section.</td>
</tr>
<tr>
<td>Handwashing</td>
<td>113953.3</td>
<td>Hands are not washed when required.</td>
</tr>
<tr>
<td>Hot and cold holding temperatures</td>
<td>113996, 113998, 114037, 114343(a)</td>
<td>Multiple potentially hazardous foods or pooled eggs held at temperatures of 50°F-130°F, without any other intervention.</td>
</tr>
<tr>
<td>Time as a Public Health Control</td>
<td>114000</td>
<td>Food that has been time marked and has exceeded time marked.</td>
</tr>
<tr>
<td>Cooling</td>
<td>114002, 114002.1</td>
<td>Potentially hazardous food being cooled improperly.</td>
</tr>
<tr>
<td>Cooking Temperatures</td>
<td>114004, 114008, 114010</td>
<td>Potentially hazardous food not cooked as required.</td>
</tr>
<tr>
<td>Reheating Temperatures</td>
<td>114014, 114016</td>
<td>Potentially hazardous food not reheated as required.</td>
</tr>
<tr>
<td>Food in good condition, safe and unadulterated</td>
<td>113967, 113976, 113980, 113996, 113990, 114035, 114254 (c), 114254.3</td>
<td>Food that has evidence of being contaminated or adulterated.</td>
</tr>
<tr>
<td>Food Contact Surfaces: clean and sanitized</td>
<td>114099.8, 114117</td>
<td>Improper sanitization of food contact surfaces; Improper warewashing machine temperature; Contamination of food contact surfaces that could result in food contamination; and failure to sanitize food contact surfaces when required.</td>
</tr>
<tr>
<td>Food from Approved Source</td>
<td>113980, 113982, 114021-114031, 114041</td>
<td>Any violation of these sections.</td>
</tr>
<tr>
<td>Shell stock tags</td>
<td>114039-114039.5</td>
<td>Missing or incomplete shellfish certification tags or improper wet storage of shellfish (includes commingling)</td>
</tr>
<tr>
<td>Gulf Oyster Regulations</td>
<td>113707</td>
<td>Any violation of this section.</td>
</tr>
<tr>
<td>HACCP Variance</td>
<td>114057, 114057.1, 114417.6</td>
<td>Food facility is o packaging PHF using a ROP method or is modifying food using acidification or water activity to prevent the growth of Clostridium botulinum and has not obtained a HACCP Plan o required to have a Department approved HACCP Plan and is not following the procedures o not following the variance provisions as approved by the Department</td>
</tr>
<tr>
<td>Licensed health care facilities/public &amp; private schools</td>
<td>114091</td>
<td>Any violation of this section.</td>
</tr>
<tr>
<td>Hot and Cold Water</td>
<td>114192</td>
<td>o Hot water at warewashing sink is less than 110°F. o Contaminated or unapproved water supply. o No potable water available</td>
</tr>
<tr>
<td>Sewage and Wastewater</td>
<td>114197</td>
<td>o Overflows or back-ups into the food facility that can or does result in contamination of food contact surfaces and adulteration of foods o Overflowing or clogged grease trap/interceptor o Lack of operable toilets</td>
</tr>
<tr>
<td>Rodents, insects, birds or animals</td>
<td>114259.1</td>
<td>Presence of cockroaches, mice, rats and similar vermin (that carry disease) within the food facility as evidenced by live bodies, fresh droppings, vomitus, urine stains, or gnaw marks that has resulted or would likely result in contamination of food, equipment, packaging or utensils.</td>
</tr>
</tbody>
</table>

113700. Chapter Title

This chapter shall be known and may be cited as the California Uniform Retail Food Facilities Law.

113705. Legislative Intent to Preempt Local Standards

The Legislature finds and declares that the public health interest requires that there be uniform statewide health and sanitation standards for retail food facilities to assure the people of this state that food will be pure, safe, and unadulterated. It is the intention of the Legislature to occupy the whole field of health and sanitation standards for these food facilities, and the standards set forth in this chapter and regulations adopted pursuant to its provisions shall be exclusive of all local health and sanitation standards relating to these facilities.

113710. Authority to Adopt Regulations

The State Department of Health Services shall adopt regulations to implement and administer the provisions of this chapter.

113715. Authority to Establish Local Requirements

Nothing in this chapter shall prohibit a local governing body from adopting an evaluation or grading system for food facilities, from prohibiting any type of food facility, from adopting an employee health certification program, or from regulating the provision of patron toilet and hand washing facilities.

113716. Minimum Standards of Knowledge in Food Safety

(a) (1) On or before January 1, 2000, each food facility shall have an owner or employee who has successfully passed an approved and accredited food safety certification examination. For purposes of this section, multiple contiguous food facilities permitted within the same site and under the same management, ownership, or control shall be deemed to be one food facility, notwithstanding the fact that the food facilities may operate under separate permits.

(2) The Legislature finds and declares that the certification required by this section may impose hardship on the owners and operators of smaller food facilities and, therefore, to the extent that a person who is seeking certification pursuant to this section requires training in order to successfully pass an approved and accredited food safety certification examination, this training shall be designed and provided in as flexible a manner as possible. To that end, the Legislature further finds and declares that this training may include, but need not be limited to, classroom training, home study programs, and computer-assisted training.

(b) On and after January 1, 2000, a food facility that commences operation, changes ownership, or no longer has a certified owner or employee pursuant to this section shall have 60 days to comply with subdivision (a).

(c) There shall be at least one certified owner or employee at each food facility.
No certified person at a food facility for purposes of subdivision (a) may serve at any other food facility as the person required to be certified pursuant to this section. The certified owner or employee need not be present at the food facility during all hours of operation.

(d) The responsibilities of a certified owner or employee at a food facility shall include the safety of food preparation and service, including ensuring that all employees who handle, or have responsibility for handling, unpackaged foods of any kind have sufficient knowledge to ensure the safe preparation or service of the food, or both. The nature and extent of the knowledge that each employee is required to have may be tailored, as appropriate, to the employee's duties related to food safety issues.

(e) The food safety certificate issued pursuant to this section shall be retained on file at the food facility at all times, and shall be made available for inspection by the health enforcement officer.

(f) The issuance date for each original certificate issued pursuant to this section shall be the date when the individual successfully completes the examination. A certificate shall expire three years from the date of original issuance. Any replacement or duplicate certificate shall have as its expiration date the same expiration date that was on the original certificate.

(g) Certified individuals shall be recertified every three years by passing an approved and accredited food safety certification examination.

(h) On or before March 1, 1999, enforcement agencies shall notify all permitted food facilities subject to this section of the new legal obligation imposed by this section and provide to them the names and contact addresses for all approved and accredited food safety certification examinations.

(i) The food safety certification examination shall include, but need not be limited to, the following elements of knowledge:

1. Foodborne illness, including terms associated with foodborne illness, microorganisms, hepatitis A, and toxins that can contaminate food and the illness that can be associated with contamination, definition and recognition of potentially hazardous foods, chemical, biological, and physical contamination of food, and the illnesses that can be associated with food contamination, and major contributing factors for foodborne illness.

2. The relationship between time and temperature with respect to foodborne illness, including the relationship between time and temperature and microorganisms during the various food handling, preparation, and serving states, and the type, calibration, and use of thermometers in monitoring food temperatures.

3. The relationship between personal hygiene and food safety, including the association of hand contact, personal habits and behaviors, and food worker health to foodborne illness, and the recognition of how policies, procedures, and management contribute to improved food safety practices.

4. Methods of preventing food contamination in all stages of food handling, including terms associated with contamination and potential hazards prior to, during, and after delivery.

5. Procedures for cleaning and sanitizing equipment and utensils.

6. Problems and potential solutions associated with facility and equipment design, layout, and construction.
(7) Problems and potential solutions associated with temperature control, preventing cross-contamination, housekeeping, and maintenance.

(j) (1) Except as otherwise provided in paragraph (2), tests, utilizing forms recognized by the Conference on Food Protection, of the following food safety certification examination providers shall be deemed to be approved and accredited for purposes of this section:

(A) The National Restaurant Association Educational Foundation’s ServSafe Food Protection Manager Certification Examination.

(B) Experior Assessments LLC.

(C) The National Registry of Food Safety Professionals.

(D) The certifying board of the Dietary Managers’ Association.

(2) (A) On or before January 1, 2000, the department, in consultation with the California Conference of Directors of Environmental Health (CCDEH), the Conference for Food Protection, representatives of the retail food industry, and other interested parties, shall develop regulations to approve and accredit additional equivalent food safety certification examinations and to disapprove and eliminate accreditation of food safety certification examinations.

(B) Commencing January 1, 1999, at least one of the accredited statewide food safety certification examinations shall cost no more than sixty dollars ($60), including the certificate. However, commencing January 1, 2000, the department may adjust the cost of food safety certification examinations to reflect actual expenses incurred in producing and administering the food safety certification examinations required under this section. If a food safety certification examination is not available at the price established by the department, the certification and recertification requirements relative to food safety certification examinations imposed by this section shall not apply.

(k) (1) For purposes of this section, a food facility includes only the following:

(A) A food establishment, as defined in Section 113780, at which unpackaged foods are prepared, handled, or served.

(B) A mobile food preparation unit, as defined in Section 113815.

(C) A stationary mobile food preparation unit, as defined in Section 113890.

(D) A commissary, as defined in Section 113750.

(2) (A) Notwithstanding paragraph (1), this section shall not apply to the premises of a licensed winegrower or brandy manufacturer utilized for winetastings conducted pursuant to Section 23356.1 of the Business and Professions Code of wine or brandy produced or bottled by, or produced and packaged for, that licensee.

(B) Notwithstanding paragraph (1), this section shall not apply to those food facilities that handle only unpackaged, nonpotentially hazardous foods. Those facilities may choose to meet the requirements through full certification, or may adequately demonstrate to the enforcement officer the knowledge of the employees of the food facility of food safety principles as they relate to the specific food operation.

(3) Notwithstanding paragraph (1), this section shall not apply to a food facility operated by a school district, county office of education, or community college district if the district or office elects to be regulated by the food safety program of the city, county, or city and county in which the school district, county office of education, or community college district is located.
(l) For purposes of this section, the following definitions apply:
   (1) "Food safety program" means any city, county, or city and county program
        that requires, at a minimum, either of the following:
        (A) The training of one or more individuals, whether denominoted as "owners," "managers," "handlers," or otherwise, relating in any manner to food safety issues.
        (B) Individuals to pass a food safety certification examination.
   (2) "Food handler program" means any city, county, or city and county program
        that requires that all or a substantial portion of the employees of a food facility who are
        involved in the preparation, storage, service, or handling of food products to engage in
        food safety training or pass a food safety certification examination, or both.
   (m) (1) Any provisions of a food safety program in effect prior to January 1, 1999,
        that require training or a certification examination, or both, shall be deemed to
        satisfy the requirements of this chapter until January 1, 2001, at which time these
        provisions shall fully conform with the requirements of this chapter. However, all
        provisions of a food safety program in effect prior to January 1, 1999, that do not pertain
        to training or a certification program shall conform with the requirements of this chapter
        by January 1, 2000.
   (2) On and after January 1, 1999, a food safety program that was not in effect
        prior to that date may not be enacted, adopted, implemented, or enforced, unless the
        program fully conforms with the requirements of this chapter.
   (n) No city, county, or city and county may enact, adopt, implement, or enforce
        any requirement that any food facility or any person certified pursuant to this section do
        any of the following:
        (1) Obtain any food safety certificate or other document in addition to the
            certificate required by this section.
        (2) Post, place, maintain, or keep the certificate required by this section other
            than as specified in subdivision (e).
        (3) Pay any fee or other sum as a condition for having a certificate verified,
            validated, or otherwise processed by the city, county, or city and county.
        (o) Certification conferred pursuant to this chapter shall be recognized
            throughout the state. Nothing in this chapter shall be construed to prohibit any local
            enforcement agency from implementing or enforcing a food handler program, as defined
            in paragraph (2) of subdivision (l) that took effect prior to January 1, 1998, but only in
            the form in which the program existed prior to January 1, 1998.
   (p) Notwithstanding Section 113935, a violation of this section shall not
        constitute a misdemeanor, but shall constitute grounds for permit suspension or
        revocation, in accordance with Article 5 (commencing with Section 113950).

113720. References to Previous Laws

In all laws and regulations, references to Chapter 6 (commencing with Section 28190), Chapter 11 (commencing with Section 28520), and Chapter 14 (commencing with Section 28800), of Division 22 of the Health and Safety Code, or to the California Bakery Sanitation Law, the California Restaurant Act, and the Retail Food Production and Marketing Establishments Law, shall mean this Chapter or the California Uniform Retail Food Facilities Law.
sic information concerning the dosage form, route of administration, strength, actions, uses, side effects, adverse effects, interactions and nontons of toxicity of investigational drugs shall be available at the sing station where such drugs are being administered and in the pharmacy. The pharmacist shall be responsible for the proper labeling, storage and distribution of such drugs pursuant to the written order of the investigator.

(p) No drugs supplied by the hospital shall be taken from the hospital as a prescription or medical record order has been written for the direction and the medication has been properly labeled and prepared by the pharmacist in accordance with state and federal laws, for use outside of the hospital.

(q) Labeling and storage of drugs shall be accomplished to meet the following requirements:

(1) Individual patient medications, except those that have been left at the patient’s bedside, may be returned to the pharmacy for appropriate position.

(2) All drug labels must be legible and in compliance with state and federal requirements.

(3) Drugs shall be labeled only by persons legally authorized to prescribe or dispense or under the supervision of a pharmacist.

(4) Test agents, germicides, disinfectants and other household substances shall be stored separately from drugs.

(5) External use drugs in liquid, tablet, capsule or powder form shall be segregated from drugs for internal use.

(6) Drugs shall be stored at appropriate temperatures. Refrigerator temperature shall be between 2.2°C (36°F) and 7.8°C (46°F) and room temperature shall be between 15°C (59°F) and 30°C (86°F).

(7) Drugs shall be stored in an orderly manner in well-lighted cabinets, shelves, drawers or carts of sufficient size to prevent crowding.

(8) Drugs shall be accessible only to responsible personnel designated the hospital, or to the patient as provided in § 70263 (1) above.

(9) Drugs shall not be kept in stock after the expiration date on the label unless contaminated or deteriorated drugs shall be available for use.

(10) Drugs maintained on the nursing unit shall be inspected at least weekly by a pharmacist. Any irregularities shall be reported to the director of nursing service and as required by hospital policy.

(11) Discontinued individual patient’s drugs not supplied by the hospital may be sent home with the patient. Those which remain in the hospital after discharge that are not identified by lot number shall be destroyed in the following manner:

(A) Drugs listed in Schedules II, III or IV of the Federal Comprehensive Drug Abuse Prevention and Control Act of 1970, as amended, shall be destroyed in the presence of two pharmacists or a pharmacist and a registered nurse employed by the hospital. The name of the patient, the name and strength of the drug, the prescription number, the amount donated, the date of destruction and the signatures of the witnesses required above shall be recorded in the patient’s medical record or in a separate log. Such log shall be retained for at least three years.

(B) Drugs not listed under Schedules II, III or IV of the Federal Comprehensive Drug Abuse Prevention and Control Act of 1970, as amended, shall be destroyed in the presence of a pharmacist.

(c) The pharmacist shall develop and implement written quality control procedures for all drugs which are repackaged or compounded in the hospital including intravenous solution additives. He shall develop an in-service training program for the professional staff to assure compliance therewith.

(d) The pharmacist shall be consulted on proper methods for repackaging and labeling of bulk cleaning agents, solvents, chemicals and poisons used throughout the hospital.

(i) Periodically, the pharmacy and therapeutics committee, or its equivalent, shall evaluate the services provided and make appropriate recommendations to the executive committee of the medical staff and administration.


HISTORY
1. Amendment of subsection (m) filed 3-13-80; effective thirteenth day thereafter (Register 80, No. 11).
2. Amendment of subsection (n), new subsections (g)(1) and (g)(2), and amendment of Note filed 11-26-96; operative 12-26-96 (Register 96, No. 48).
3. Change without regulatory effect amending subsection (a) and Note filed 8-16-2000 pursuant to section 100, title 1, California Code of Regulations (Register 2000, No. 24).

§ 70265. Pharmaceutical Service Staff.
A pharmacist shall have overall responsibility for the pharmaceutical service. He shall be responsible for the procurement, storage and distribution of all drugs as well as the development, coordination, supervision and review of pharmaceutical services in the hospital. Hospitals with a limited permit shall employ a pharmacist on at least a consultant basis. Responsibilities shall be set forth in a job description or agreement between the pharmacist and the hospital. The pharmacist shall be responsible to the administrator and shall furnish him written reports and recommendations regarding the pharmaceutical services within the hospital. Such reports shall be provided no less often than quarterly.

§ 70267. Pharmaceutical Service Equipment and Supplies.
(a) There shall be adequate equipment and supplies for the provision of pharmaceutical services within the hospital.

(b) Reference materials containing monographs on all drugs in use in the hospital shall be available in each nursing unit. Such monographs must include information concerning generic and brand names, if applicable, available strengths and dosage forms and pharmacological data including indications, side effects, adverse effects and drug interactions.

§ 70269. Pharmaceutical Service Space.
(a) Adequate space shall be available at each nursing station for the storage of drugs and preparation of medication doses.

(b) All spaces and areas used for the storage of drugs shall be lockable and accessible to authorized personnel only.

§ 70271. Dietetic Service Definition.
Dietetic service means providing services for food preparation and nutritionally adequate food for patients with appropriate staff, space, equipment and supplies.

§ 70273. Dietetic Service General Requirements.
(a) The dietetic service shall provide food of the quality and quantity to meet the patient’s needs in accordance with physicians’ orders and, to the extent medically possible, to meet the recommended dietary allowances, 1974 edition, adopted by the Food and Nutrition Board of the National Research Council of the National Academy of Sciences, 2107 Constitution Avenue, Washington, DC 20418, and the following:

(1) Not less than three meals shall be served daily.

(2) Not more than 14 hours shall elapse between the evening meal and breakfast of the following day.

(3) Nourishment or between meal feedings shall be provided as required by the diet prescription and shall be offered to all patients unless ordered by the physician.

(4) Patient food preferences shall be respected as much as possible and substitutions shall be offered through use of a selective menu or substitutions from appropriate food groups.

(5) When food is provided by an outside food service, all applicable requirements herein set forth shall be met. The hospital shall maintain ad-
equate space, equipment and staple food supplies to provide patient food service in emergencies.
(b) Policies and procedures shall be developed and maintained in consultation with representatives of the medical staff, nursing staff and administration to govern the provision of dietician services. Policies shall be approved by the medical staff, administration and governing body. Procedures shall be approved by the medical staff and administration.
(c) The responsibility and the accountability of the dietician service to the medical staff and administration shall be defined.
(d) A diet manual approved by the dietician and the medical staff shall be used as the basis for diet orders and for planning modified diets. Copies of the diet manual shall be available at each nursing station and in the dish service area.
(e) Therapeutic diets shall be provided as prescribed by a person lawfully authorized to give such an order and shall be planned, prepared and served with supervision and/or consultation from the dietician. Persons responsible for therapeutic diets shall have sufficient knowledge of food values to make appropriate substitutions when necessary.
(f) A current profile card shall be maintained for each patient indicating diet, likes, dislikes and other pertinent information concerning the patient's dietary needs.
(g) Menus.
(1) Menus for regular and routine modified diets shall be written at least one week in advance, dated and posted in the kitchen at least three days in advance.
(2) If any meal served varies from the planned menu, the change shall be noted in writing on the posted menu in the kitchen.
(3) Menus shall provide a variety of foods in adequate amounts at each meal.
(4) Menus should be planned with consideration for cultural and religious background and food habits of patients.
(5) A copy of the menu as served shall be kept on file for at least 30 days.
(6) Records of food purchased shall be kept available for one year.
(7) Standardized recipes, adjusted to appropriate yield, shall be maintained and used in food preparation.
(h) Food shall be prepared by methods which conserve nutritive value, flavor and appearance. Food shall be served attractively at appropriate temperatures and in a form to meet individual needs.
(i) Nutritional Care.
(1) Nutritional care shall be integrated in the patient care plan.
(2) Observations and information pertinent to dietician treatment shall be recorded in patient's medical records by the dietician.
(3) Pertinent dietary records shall be included in patient's transfer discharge record to ensure continuity of nutritional care.
(j) In-service training shall be provided for all dietician service personnel and a record of subject areas covered, date and duration of each session and attendance lists shall be maintained.
(k) Food Storage.
(1) Food storage areas shall be clean at all times.
(2) Dry or staple items shall be stored at least 30 cm (12 inches) above the floor, in a ventilated room, not subject to sewage or waste water backflow, or contamination by condensation, leakage, rodents or vermin.
(3) All readily perishable foods or beverages capable of supporting rapid and progressive growth of microorganisms which can cause food infections or food intoxication shall be maintained at temperatures of 7°C (45°F) or below, or at 60°C (140°F) or above, at all times, except during necessary periods of preparation and service. Frozen food shall be stored at -18°C (0°F) or below.
(4) There shall be a reliable thermometer in each refrigerator and in storerooms used for perishable food.
(5) Pesticides, other toxic substances and drugs shall not be stored in the kitchen area or in storerooms for food and/or food preparation equipment and utensils.
(6) Soaps, detergents, cleaning compounds or similar substances shall not be stored in food storerooms or food storage areas.
(l) Sanitation.
(1) All kitchens and kitchen areas shall be kept clean, free from litter and rubbish and protected from rodents, roaches, flies and other insects.
(2) All utensils, counters, shelves and equipment shall be kept clean, maintained in good repair and shall be free from breaks, corrosion, open seams, cracks and chipped areas.
(3) Plasticware, china and glassware that is unsightly, unsanitary or hazardous because of chips, cracks or loss of glaze shall be discarded.
(4) Ice which is used in connection with food or drink shall be from a sanitary source and shall be handled and dispensed in a sanitary manner.
(5) Kitchen wastes that are not disposed of by the mechanical means shall be kept in leakproof, nonabsorbent, tightly closed containers and shall be disposed of as frequently as necessary to prevent a nuisance or unsightliness.
(m) All utensils used for eating, drinking and in the preparation and serving of food and drink shall be cleaned and disinfected or discarded after each usage.
(1) Gross food particles shall be removed by scraping and prewashing in running water.
(2) The utensils shall be thoroughly washed in hot water with a minimum temperature of 43°C (110°F), using soap or detergent, rinsed in hot water to remove soap or detergent and disinfected by one of the following methods or an equivalent method approved by the Department:
(A) Immersion for at least two minutes in clean water at 77°C (170°F).
(B) Immersion for at least 30 seconds in clean water at 82°C (180°F).
(C) Immersion in water containing bactericidal chemical as approved by the Department.
(3) After disinfection the utensils shall be allowed to drain and dry in racks or baskets on nonabsorbent surfaces. Drying cloths shall not be used.
(4) Results obtained with dishwashing machines shall be equal to those obtained by the methods outlined above and all dishwashing machines shall meet the requirements contained in Standard No. 3 as amended in April 1965 of the National Sanitation Foundation, P.O. Box 1468, Ann Arbor, MI 48106.
Note: Authority cited: Sections 208(a) and 1275, Health and Safety Code. Reference: Section 1276, Health and Safety Code.
History: 1. Amendment of subsection (e) filed 3-13-80; effective thirtieth day thereafter (Register 80, No. 11).
§ 70277. Dietary Service Equipment and Supplies.

(a) Equipment of the type and in the amount necessary for the proper preparation, serving and storing of food and for proper dishwashing shall be provided and maintained in good working order.

(b) The dietary service area shall be ventilated in a manner that will maintain comfortable working conditions, remove objectionable odors and fumes and prevent excessive condensation.

(c) Equipment necessary for preparation and maintenance of menus, records and references shall be provided.

(d) Fixed and mobile equipment in the dietary service area shall be located to assure sanitary and safe operation and shall be of sufficient size to handle the needs of the hospital.

(e) Food Supplies.

(1) At least one week's supply of staple foods and at least two (2) days supply of perishable foods shall be maintained on the premises. Supplies shall be appropriate to meet the requirements of the menu.

(2) All food shall be of good quality and procured from sources approved or considered satisfactory by federal, state and local authorities. Food in unlabeled, rusty, leaking, broken containers or cans with side seams dents, rim dents or swells shall not be accepted or retained.

(3) Milk, milk products and products resembling milk shall be processed or manufactured in milk product plants meeting the requirements of Division 15 of the California Food and Agricultural Code.

(4) Milk may be served in individual containers, the cap or seal of which shall not be removed except in the presence of the patient. Milk may be served from a dispensing device which has been approved for such use. Milk served from an approved device shall be dispensed directly into the glass or other container from which the patient drinks.

(5) Catered foods and beverages from a source outside the hospital shall be prepared, packed, properly identified, stored and transported in compliance with these regulations and other applicable federal, state and local codes as determined by the Department.

(6) Foods held in refrigerated or other storage areas shall be appropriately covered. Food which was prepared and not served shall be stored appropriately, clearly labeled and dated.

(7) Hermetically sealed foods or beverages served in the hospital shall have been processed in compliance with applicable federal, state and local codes.

§ 70279. Dietary Service Space.

(a) Adequate space for the preparation and serving of food shall be provided. Equipment shall be placed so as to provide aisles of sufficient width to permit easy movement of personnel, mobile equipment and supplies.

(b) Well ventilated food storage areas of adequate size shall be provided.

(c) A minimum of .057 cubic meters (two cubic feet) of usable refrigerated space per bed shall be maintained for the storage of frozen and chilled foods.

(d) Adequate space shall be maintained to accommodate equipment, personnel and procedures necessary for proper cleaning and sanitizing of dishes and other utensils.

(e) Where employee dining space is provided, a minimum of 1.4 square meters (15 square feet) of floor area per person served, including serving area, shall be maintained.

(f) Office or other suitable space shall be provided for the dietitian or dietary service supervisor for privacy in interviewing personnel, conducting other business related to dietary service and for the preparation and maintenance of menus and other necessary reports and records.

Article 4. Supplemental Service Approval

§ 70301. Supplemental Service Approval Required.

(a) Any licensee desiring to establish or conduct, or who holds, represents or advertises by any means the provision of a supplemental service, shall obtain prior approval from the Department or a special permit if required by Section 70351.

(b) The provisions of this Article shall apply only to any supplemental service for which a special permit is not required.

(c) Any licensee who offers a supplemental service for which approval is now required under these regulations is authorized to continue furnishing such service without obtaining approval until the Department inspects and evaluates the quality of the service and determines whether such service meets the requirements for the service contained in these regulations. If the Department determines that the service meets such requirements, it shall notify the licensee in writing. If the Department determines that the service does not meet the requirements, it shall notify the licensee of all deficiencies of compliance with these regulations and the hospital shall agree with the Department upon a plan of corrections which shall give the hospital a reasonable time to correct such deficiencies. If at the end of the allowed time, as revealed by repeat inspection, the hospital has failed to correct the deficiencies, the licensee shall cease and desist all holding out, advertising or otherwise representing that it furnishes such recognized service.

§ 70303. Application.

Any licensee desiring approval for a supplemental service shall file with the Department an application on forms furnished by the Department.

§ 70305. Issuance, Suspension and Renewal.

(a) The Department shall list on the hospital license each supplemental service for which approval is granted.

(b) If the applicant is in compliance with the laws and regulations, the Department shall deny the applicant approval and shall immediately notify the applicant in writing. Within 30 days after receipt of the Department's notice, the applicant may present his written petition for a hearing to the Department. The Department shall set the matter for hearing within 30 days after receipt of the petition in proper form. The proceedings shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code.

(c) Each supplemental service approval shall expire on the date of expiration of the hospital license. A renewal of the approval may be issued for a period not to exceed two years if the holder of the approval has been found not to have been in violation of any statutory requirements, regulations or standards during the preceding approval period.

§ 70307. Program Flexibility.

(a) All hospitals shall maintain continuous compliance with the supplemental service requirements. These requirements do not prohibit the use of alternate concepts, methods, procedures, techniques, equip-
§ 70833. Autoclaves and Sterilizers.
(a) Autoclaves and sterilizers shall be maintained in operating condition at all times.
(b) Instructions for operating autoclaves and sterilizers shall be posted in the area where the autoclaves and sterilizers are located.
(c) Written procedures shall be developed, maintained and available to personnel responsible for sterilization of supplies and equipment that include, but are not limited to the following:
(1) Time, temperature, and pressure for sterilizing the various bundles, packs, dressings, instruments, solutions, etc.
(2) Cleaning, packaging, storing and issuance of supplies and equipment.
(3) Dating and outdated of materials sterilized.
(4) Loading of the sterilizer.
(5) Daily checking of recording and indicating thermometers and filling for one year of recording thermometer charts.
(6) Monthly bacteriological test, the bacterial organism used and filling for one year of the test results.
(7) Length of aeration time for materials gas-sterilized.
(b) A written record of inspection, cleaning or replacement including static pressure drop shall be regularly maintained and available for inspection. The record shall include a description of the filters originally installed, the American Society of Heating, Refrigeration and Air Conditioning Engineers (ASHRAE) atmospheric dust spot test efficiency rating and the criteria established by the manufacturer or supplier to determine when replacement or cleaning is necessary.
(c) Following filter replacement or cleaning, the installation shall be visually inspected for torn media and bypass in filter frames by means of a flashlight or equivalent, both with fans in operation and stopped. Tears in filter media and bypass in filter frames shall be eliminated in accordance with the manufacturer's directions and as required by the Department.
(d) Where filter maintenance is performed by an equipment service company, a certification shall be provided to the licensee that the requirements listed in Section 70839 (a) and (b) have been accommodated.
(e) If filter maintenance as required in Section 70839 (a) and (b) is performed by employees of the hospital, a written record shall be maintained by the licensee.

§ 70835. Disinfecting.
Notwithstanding Sections 208 (a) and 1275, Health and Safety Code. Reference: Section 1276, Health and Safety Code.

History
1. Repealer filed 6-15-89 as an emergency; operative 6-15-89 (Register 89, No. 25). A Certificate of Compliance must be transmitted to OAL within 120 days of the section will be reinstated as it existed prior to the emergency on 10-13-89.
2. Certificate of Compliance as to 6-15-89 order transmitted to OAL on 10-13-89 and disapproved by OAL on 11-13-89 (Register 89, No. 46). A Certificate of Compliance as to 6-15-89 order transmitted to OAL 120 days or the section will be reinstated as it existed prior to the section between 3-16-89.
3. Certificate of Compliance as to 6-15-89 order transmitted to OAL 3-15-90 and filed 4-16-90 (Register 90, No. 54).

§ 70837. General Safety and Maintenance.
(a) The hospital shall be clean, sanitary and in good repair at all times. Maintenance shall include provision and surveillance of services and procedures for the safety and well-being of patients, personnel and visitors.
(b) Hospital buildings and grounds shall be maintained free of such environmental pollutants and such nuisances as may adversely affect the health or welfare of patients to the extent that such conditions are within the reasonable control of the hospital.
(c) All hospitals shall maintain in operating condition all buildings, fixtures and spaces in the numbers and types as specified in construction requirements under which the hospital or unit was first licensed.
(d) A written manual on maintenance of heating, air conditioning and ventilation systems shall be adopted by each hospital and a maintenance log shall be maintained.
(e) Equipment provided must meet any and all applicable California Occupational Safety and Health Act requirements in effect as of the time of purchase. All portable electrical equipment using 110-120 volt 60 hertz current shall be equipped with a three-wire grounded power cord with an Underwriters Laboratories approved hospital grade three-prong plug. The cord grip shall be an integral part of the plug.
(f) All gauging and measuring equipment shall be regularly calibrated as specified by the manufacturer and records of such testing kept for at least two years.

§ 70839. Air Filters.
(a) The licensee shall be responsible for regular inspection, cleaning or replacement of all filters installed in heating, air conditioning and ventilating systems, as necessary to maintain the systems in normal operating condition. The efficiency of the replacement filters shall be equal to the efficiency rating of the replaced filters.

§ 70841. Emergency Lighting and Power System.
(a) Auxiliary lighting and power facilities shall be readily available at all times.
(1) The emergency lighting and power system shall be maintained in operating condition to provide automatic restoration of power for emergency circuits within ten seconds after normal power failure.
(2) Emergency generators installed in hospitals shall be tested under load conditions for at least 30 minutes at intervals of not more than 7 days.
(b) The licensee shall provide and maintain an emergency electrical system in compliance with Section E702-7 and E702-20, Part 3, Title 24, California Administrative Code. The system shall serve all lighting, signals, alarms and equipment required to permit continued operation of all necessary functions of the hospital for a minimum of 24 hours.
(c) The Department may require the licensee to submit a report of evaluation of the emergency electrical system by a registered electrical engineer to substantiate compliance with Subarticle E702-7, Part 3, Title 24, California Administrative Code. Essential engineering data, including load calculations, assumptions and tests and, where necessary, plans and specifications acceptable to the Department shall be included in the report.
(d) Where alteration of the emergency electrical system is determined to be necessary, the work shall comply with Sections E702-20 and E702-24, Part 3, Title 24, California Administrative Code.
(e) A written record of inspection, performance, exercising period and repairs shall be maintained and available.

§ 70843. Storage and Disposal of Solid Wastes.
(a) Solid wastes shall be stored and eliminated in a manner to preclude the transmission of communicable disease. These wastes shall not be a nuisance or a breeding place for insects or rodents nor be a food source for either.
(b) Solid waste containers shall be stored and located in a manner that will protect against odors.
(c) Syringes and needles shall be disposed of safely as biohazardous waste in puncture proof containers.

Notwithstanding Sections 208 (a) and 1275, Health and Safety Code. Reference: Section 1276, Health and Safety Code.

History
1. Certificate of Compliance as to 11-16-89 order including amendment of subsection (c) transmitted to OAL 3-15-90 and filed 4-16-90 (Register 90, No. 54).

§ 70845. Solid Waste Containers.
(a) All containers, except movable bins used for storage of solid wastes, shall have tight-fitting covers in good repair, external handles and be leakproof and rodent proof.
2585. (a) Any person representing himself or herself as a registered dietitian shall meet one of the following qualifications:

(1) Been granted, prior to January 1, 1981, the right to use the term "registered dietitian" by a public or private agency or institution recognized by the State Department of Health Services as qualified to grant the title, provided that person continues to meet all requirements and qualifications periodically prescribed by the agency or institution for the maintenance of that title.

(2) Possess all of the following qualifications:
   (A) Be 18 years of age or older.
   (B) Satisfactory completion of appropriate academic requirements for the field of dietetics and related disciplines and receipt of a baccalaureate or higher degree from a college or university accredited by the Western Association of Schools and Colleges or other regional accreditation agency.
   (C) Satisfactory completion of a program of supervised practice for a minimum of 900 hours that is designed to prepare entry level practitioners through instruction and assignments in a clinical setting. Supervisors of the program shall meet minimum qualifications established by public or private agencies or institutions recognized by the State Department of Health Services to establish those qualifications.
   (D) Satisfactory completion of an examination administered by a public or private agency or institution recognized by the State Department of Health Services as qualified to administer the examinations.
   (E) Satisfactory completion of continuing education requirements established by a public or private agency or institution recognized by the State Department of Health Services to establish the requirements.
   (b) Any person representing himself or herself as a dietetic technician, registered shall possess all of the following qualifications:
   (1) Be 18 years of age or older.
   (2) Satisfactory completion of appropriate academic requirements and receipt of an associate's degree or higher from a college or university accredited by the Western Association of Schools and Colleges or other regional accreditation agency.
   (3) Satisfactory completion of the dietetic technician program requirements by an accredited public or private agency or institution.
recognized by the State Department of Health Services including not less than 450 hours of supervised practice.

(4) Satisfactory completion of an examination administered by a public or private agency or institution recognized by the State Department of Health Services to administer the examination.

(5) Satisfactory completion of continuing education requirements established by a public or private agency or institution recognized by the State Department of Health Services to establish the requirements.

(c) It is a misdemeanor for any person not meeting the criteria of subdivision (a) or (b) to use, in connection with his or her name or place of business, the words "dietetic technician, registered," "dietitian," "dietician," "registered dietitian," "registered dietician," or the letters "RD," "DTR," or any other words, letters, abbreviations, or insignia indicating or implying that the person is a dietitian, or dietetic technician, registered or registered dietitian, or to represent, in any way, orally, in writing, in print or by sign, directly or by implication, that he or she is a dietitian or a dietetic technician, registered or a registered dietitian.

(d) Any person employed by a licensed health care facility as a registered dietitian on the effective date of this chapter may continue to represent himself or herself as a registered dietitian while employed by a licensed health care facility, if he or she has satisfied the requirements of either paragraph (1) or paragraph (2) of subdivision (a), except that he or she shall not be required to satisfy the examination requirement of subparagraph (B) of paragraph (2) of subdivision (a).

(e) Notwithstanding any other provision of law or regulation that limits reimbursement to state licensed health care providers and upon referral by a physician and surgeon the following persons may be reimbursed for the nutritional advice or advice concerning proper nutrition as set forth in Section 2068, or for the nutritional assessments, counseling, and treatments as set forth in Section 2586:

(1) Registered dietitians.

(2) Other nutritional professionals with a master's or higher degree in a field covering clinical nutrition sciences, from a college or university accredited by a regional accreditation agency, who are deemed qualified to provide these services by the referring physician and surgeon.

(f) Nothing in this section shall be construed to mandate direct reimbursement of registered dietitians, or other nutrition professionals described in subdivision (e), as a separate provider type under the Medi-Cal program, nor to mandate reimbursement where expressly prohibited by federal law or regulation.

2586. (a) Notwithstanding any other provision of law, a registered dietitian, or other nutritional professional meeting the qualifications set forth in subdivision (e) of Section 2585 may, upon referral by a health care provider authorized to prescribe dietary treatments, provide nutritional and dietary counseling, conduct nutritional and dietary assessments, and develop nutritional and dietary treatments, including therapeutic diets, for individuals or groups of patients in licensed institutional facilities or in private office settings. The referral shall be accompanied by a written prescription signed by the health care provider detailing the patient's diagnosis and including a statement of the desired objective of dietary treatment, unless a referring physician and surgeon has established or approved a written protocol governing the patient's treatment. The services described in this subdivision may be termed
"medical nutrition therapy."

(b) A registered dietitian, or other nutritional professional meeting the qualifications set forth in subdivision (e) of Section 2585, may accept or transmit verbal orders or electronically transmitted orders from the referring physician consistent with an established protocol to implement medical nutrition therapy.

(c) A registered dietitian, or other nutritional professional meeting the qualifications set forth in subdivision (e) of Section 2585, may order medical laboratory tests related to nutritional therapeutic treatments when authorized to do so by a written protocol prepared or approved by the referring physician and when, in the absence of the referring physician at a patient visit, in a clinic where there is a registered nurse on duty, a registered nurse is notified that a medical laboratory test is being ordered and is afforded an opportunity to assess the patient.

(d) (1) Notwithstanding any other provision of law, a dietetic technician, registered meeting the qualifications set forth in Section 2585 may, under the direct supervision of a registered dietitian, assist in the implementation or monitoring of services specified in subdivision (a), but may not develop nutritional or dietary therapy or treatments or accept or transmit verbal orders.

(2) (A) For purposes of this subdivision, "direct supervision" means the supervising registered dietitian shall be physically available to the dietetic technician, registered for consultation whenever consultation is required. However, in the case of a small or rural hospital, as defined in Section 124840 of the Health and Safety Code, the registered dietitian may be available for consultation by telephone or other electronic means, provided that the registered dietitian is physically on the facility site a sufficient amount of time to provide adequate supervision over and review of the work of the dietetic technician, registered.

(B) For purposes of this subdivision, "physically available" means physical onsite presence during regular business hours, and includes telephonic or electronic availability at all times and the ability to respond to the facility within a reasonable period of time when required. The registered dietitian shall review any activities performed by the dietetic technician, registered during any period when the registered dietitian was not physically onsite.

(3) For purposes of this subdivision, a registered dietitian shall not supervise more than two dietetic technicians, registered at one time.

(e) It is a misdemeanor for a person specified in subdivision (e) of Section 2585 to practice in a manner inconsistent with the requirements set forth in this section.

(f) Nothing in this section shall preclude a person specified in subdivision (e) of Section 2585 from providing information as permitted by Section 2068.

(g) For purposes of this section, "health care provider" means any person licensed or certified pursuant to this division, or licensed pursuant to the Osteopathic Initiative Act or the Chiropractic Initiative Act.

(h) The requirement of a written prescription shall be deemed to be satisfied by an entry in the patient records of a patient who is undergoing treatment at a licensed health care facility if the contents of the patient records reflect the information required by this section.

(i) Nothing in this section or Section 2585 shall be interpreted to establish educational criteria or practice restrictions or limitations for other health care providers licensed under Division 2 (commencing with Section 500) or the Osteopathic Initiative Act or the Chiropractic Initiative Act.
2586.2. A person may engage in the activities set forth in subdivision (a) of Section 2586 if the person meets both of the following requirements:
   (a) The person is engaged in the activities as part of a supervised practice program for a registered dietitian pursuant to subparagraph (C) of paragraph (2) of subdivision (a) of Section 2585.
   (b) The person is enrolled in or has completed a course of study to fulfill the educational requirements for a registered dietitian in subparagraph (B) of paragraph (2) of subdivision (a) of Section 2585.

2586.4. A person may engage in the activities set forth in subdivision (d) of Section 2586 if the person meets both of the following requirements:
   (a) The person is engaged in the activities as part of a supervised practice program for a dietetic technician pursuant to paragraph (3) of subdivision (b) of Section 2585.
   (b) The person is enrolled in or has completed a course of study to fulfill the educational requirements for a dietetic technician in paragraph (2) of subdivision (b) of Section 2585.

2586.6. A person may engage in the activities set forth in subdivision (a) of Section 2586 for six months from the date that he or she completed a supervised practice program, or until the person receives notice that he or she failed the examination specified in subdivision (d), whichever occurs first, if all of the following conditions apply:
   (a) The person performs under the direct and immediate supervision of a registered dietitian.
   (b) The person has completed the supervised practice program requirements under subdivision (a) of Section 2585.
   (c) The person has written verification, including the program director's original signature, that the person has completed the required supervised practice program.
   (d) The person has applied to take the registered dietitian examination specified in subparagraph (D) of paragraph (2) of subdivision (a) of Section 2585 and is waiting for an examination date.

2586.8. A person may engage in the activities set forth in subdivision (d) of Section 2586 for six months from the date he or she completed the supervised practice program for dietetic technicians, or until the person receives notice that he or she has failed the examination specified in subdivision (d), whichever occurs first, if all of the following conditions apply:
   (a) The person performs under the direct and immediate supervision of a registered dietitian.
   (b) The person has completed the supervised practice program requirements under subdivision (b) of Section 2585.
   (c) The person has written verification, including the program director's original signature, that the person has completed the required supervised practice.
   (d) The person has applied to take the dietetic technician examination specified in paragraph (4) of subdivision (b) of Section 2585 and is waiting for an examination date.
Sysco Los Angeles
2009 Disaster Planning Policy

Sysco Los Angeles has designed a two-phase program that we feel will effectively fulfill your requests. Phase one begins at the customer level. At this time we are asking our customers to review and satisfy the suggestions and guidelines listed below. Also, to complete and return the following enclosed forms:

*Healthcare & Hospitality Account Emergency-Disaster Profile*
and *Supplemental Order Form*.

**Phase I – Customer**

1. Review your current disaster stock levels to ensure adequate product is on hand. If necessary, replenish stock levels to meet census needs. *(See Summary of Foodservice Disaster Requirements).*

2. Make arrangements for water supplies from outside sources. In the event of a wide-spread emergency/disaster, Sysco Los Angeles *(does not)* have the stock available to meet all of your water requirements.

3. Establish and submit to Sysco Los Angeles a standing disaster order to include *(only)* additional stock needed for staff and items to compliment the menu. For example, snack foods, nutritional supplements, cleaning supplies, fruit juices and paper supplies. Complete and submit your order on the Supplemental Order Form included in this packet. When preparing your emergency-disaster order, please bear in mind that an urgent situation could leave you without gas or electricity. *(Orders will not be sent without communicating with the customer)*, unless prior approval has given guaranteeing receipt of product.

4. Make sure your emergency order is reasonable. *(We cannot take product back).*

Phase one of this program becomes complete, when the *Healthcare/Hospitality Account Disaster Profile* and *Supplemental Order* forms are received. It is imperative to fax all forms to our facility. This will be kept confidential in the Sysco Los Angeles Healthcare Sales Department.
Phase II – Sysco Los Angeles

1. Healthcare customers with primary vendor relationships with Sysco Los Angeles will receive priority service. Hospitality customers with primary vendor relationships with Sysco Los Angeles will be prioritized immediately following Healthcare.

2. Customers will be called in advance to review their standing order for supplemental items as stated above in Point #3.

3. Customers must be available to receive orders on a 24-hour basis. This will be determined by the traffic conditions and accessibility to facility.

4. Sysco Los Angeles cannot be held liable for the provision as established with this Policy/Procedure, in the event of circumstances out of its control, which may prevent SYSCO from performing its promise.

5. SYSCO will attempt to contact Customer contacts several times, but if unsuccessful, the order as noted on the “Emergency/Disaster Supplemental Order Form,” will be shipped automatically to your location. Signature on the “Shipment Authorization Letter” authorizes Sysco Los Angeles to ship the emergency/disaster order, that the product/order will be received by the facility, no matter time of day, and that SYSCO will be compensated for the product/order at the customary invoice charge.

6. In consideration of the welfare of our employees and their families, we may well not distribute any orders, depending upon severity of conditions, although every effort will be made to meet our commitments.

Please be advised that in the aftermath of a natural disaster, Sysco Los Angeles will be in communication to inform you of any changes that may alter routine scheduled deliveries.

Your cooperation in this most important preparedness process is greatly appreciated. We look forward to assisting you but hopefully, this will only be an exercise of good faith!

Once the Healthcare/Hospitality Account Disaster Profile and the Supplemental Order Forms are received at SYSCO, an Emergency/Disaster Assurance Letter will be furnished to you as a receipt of acknowledgement of your order.

Send to:
Sysco Los Angeles
Attention:
Linda Rodriguez, Healthcare Sales Dept
20701 E. Currier Rd., Walnut, CA 91789-2904
FAX (909) 594-0565

Disaster Recommendations:
• Develop a disaster plan that is clear and easy to read.
• Keep the Disaster Plan in a designated place where employees can locate it quickly.
• Keep a list of phone numbers, emergency phone numbers, and addresses for your employees, and other essential people in the community e.g.; The Red Cross, National Guard, Security Companies that you deal with and keep this list with the disaster plan, as well as other locations in the facility and at home.
• Map out where your employees live so that you have an idea of when, or if, they will be able to arrive.
• Contact resources that will be able to assist you during an emergency, (e.g. primary vendor, grocery stores and drug stores nearby, restaurants, and any other facilities that may provide assistance). Keep a list of contact names and telephone numbers for those resources.
• When prioritizing work, think of patients or residents first. Hydration is most important. Consider how much bottled water and distilled water will be needed and keep a supply on hand.
• Meal preparation needs to be simple.

Keep the following items on hand:
- Convenience items (canned chili, soups, fruits, vegetables, meats and bread, etc.)
- Ready to use items (juice, pudding, gravy, etc.)
- Individually wrapped items (portion pack condiments, granola bars, cookies, etc.)
- Nutritional products (high calorie, high protein, snacks and shakes)
- Food items for pureed diets (canned puree meats, fruits, and vegetables, shelf-stable thickened liquids, food thickener, nutritional supplements)

Remember to:
- First – Use all of the edible foods in your refrigerator.
- Second - Use as many freezer foods as possible before spoilage sets in.
- Third – Start on your supply of non-perishable foods.

• Remember you may not have power.
  - Make sure you have manual can openers.
  - Make a plan for transporting meals to floors without the use of elevators.
  - Have flashlights and batteries available throughout the facility.
  - An outside grill with charcoal and lighter fluid may be necessary.
  - Have at least two or three chaffers available, and a supply of sterno.

• Keep a supply of paper and disposables.
  - Foam laminated plates, bowls, and cups
  - Plastic forks, spoons, and knives
  - Napkins, moist towelettes, etc.

• Keep a supply of janitorial products such as trash liners, bleach, disinfectant, and hand sanitizer on hand.
• Bolt chemical storage shelves to the wall.
• Do not store ammonia and bleach in the same area.
• Do not store chemicals near or around food items.
• Remember you will be managing people’s feelings. Be sensitive, understanding, and try to remain calm
GUIDELINES FOR CALCULATING QUANTITIES NEEDED

To calculate number of cans needed:

1. Refer to serving size after menu item.
2. Determine number of servings per can for that serving size according to the chart below.
3. Divide the number of servings needed (patient or resident census or number of meals to be served) by the number of servings per can.

Example: Sloppy Joe
Serving Size = ½ c (4 oz)
Number of 4 oz servings per #10 can = 26
Patient census = 120
120 divided by 26 = 4.6 (5 cans needed)

Guidelines for calculating servings per can:

<table>
<thead>
<tr>
<th>Size of Can</th>
<th>Net Wt.</th>
<th>4 oz (½ c)</th>
<th>6 oz (¾ c)</th>
<th>8 oz (1 c)</th>
</tr>
</thead>
<tbody>
<tr>
<td>#10</td>
<td>104 oz</td>
<td>26</td>
<td>18</td>
<td>13</td>
</tr>
<tr>
<td>#5</td>
<td>46 oz</td>
<td>11-12</td>
<td>7-8</td>
<td>6</td>
</tr>
<tr>
<td>#303</td>
<td>16-17 oz</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>#300</td>
<td>14-16 oz</td>
<td>3-4</td>
<td>2-3</td>
<td>2</td>
</tr>
</tbody>
</table>

* Required daily servings per patient/resident:
  - Protein: 6 oz
  - Vegetables: 3-5 – 4 oz servings
  - Fruit: 2-4 – 4 oz servings
  - Bread/Starch: 6-11 servings
  - Milk or Milk Equivalent: 2 — 8 oz servings

- Revised 4/96, Agency for HealthCare Administration
### Recommended Replacement Period for Store Foods Suitable for Emergency Use

<table>
<thead>
<tr>
<th>FOOD</th>
<th>No. Months</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Milk:</strong></td>
<td></td>
</tr>
<tr>
<td>Evaporated</td>
<td>6</td>
</tr>
<tr>
<td>Dry, Nonfat or Whole, in metal container</td>
<td>6</td>
</tr>
<tr>
<td><strong>Canned Meat, Poultry, Fish:</strong></td>
<td></td>
</tr>
<tr>
<td>Meat, Poultry</td>
<td>18</td>
</tr>
<tr>
<td>Fish</td>
<td>12</td>
</tr>
<tr>
<td>Mixtures of Meat, Vegetables, Cereal Products</td>
<td>18</td>
</tr>
<tr>
<td><strong>Canned Nuts:</strong></td>
<td>12</td>
</tr>
<tr>
<td><strong>Fruits and Vegetables:</strong></td>
<td></td>
</tr>
<tr>
<td>Berries and Sour Cherries, canned</td>
<td>12</td>
</tr>
<tr>
<td>Citrus Fruit Juice, canned</td>
<td>12</td>
</tr>
<tr>
<td>Other Fruits and Juices, canned</td>
<td>18</td>
</tr>
<tr>
<td>Dried Fruit, in metal container</td>
<td>12</td>
</tr>
<tr>
<td>Tomatoes, Sauerkraut, canned</td>
<td>12</td>
</tr>
<tr>
<td>Potatoes, instant</td>
<td>18</td>
</tr>
<tr>
<td>Other Vegetables</td>
<td>18</td>
</tr>
<tr>
<td><strong>Cereal or Baked Goods:</strong></td>
<td></td>
</tr>
<tr>
<td>Ready-to-Eat Cereal in metal container</td>
<td>12</td>
</tr>
<tr>
<td>Ready=to=Eat Cereal, covered and dry in original package</td>
<td>4</td>
</tr>
<tr>
<td>Uncooked Cereal (quick cooking or instant) in metal container</td>
<td>24</td>
</tr>
<tr>
<td>Uncooked cereal in original paper package</td>
<td>12</td>
</tr>
<tr>
<td>Pancake Mix in Airtight container</td>
<td>6</td>
</tr>
<tr>
<td><strong>Shortening and Oils:</strong></td>
<td></td>
</tr>
<tr>
<td>Hydrogenated Solid Shortening</td>
<td>12</td>
</tr>
<tr>
<td>Vegetable Oil</td>
<td>3</td>
</tr>
<tr>
<td><strong>Sugars and Sweets:</strong></td>
<td></td>
</tr>
<tr>
<td>Sugar, Granulated</td>
<td>24</td>
</tr>
<tr>
<td>Sugar, Brown or Powdered</td>
<td>4</td>
</tr>
<tr>
<td>Hard Candy, Gum</td>
<td>18</td>
</tr>
<tr>
<td>Honey, Jam, Syrup, kept tightly covered</td>
<td>12</td>
</tr>
<tr>
<td>Pudding Mix, kept in original packets</td>
<td>12</td>
</tr>
<tr>
<td><strong>Miscellaneous:</strong></td>
<td></td>
</tr>
<tr>
<td>Coffee, Tea, Cocoa, instant</td>
<td>18</td>
</tr>
<tr>
<td>Dry, Cream Product, instant</td>
<td>12</td>
</tr>
<tr>
<td>Bouillon Product, kept covered and dry</td>
<td>12</td>
</tr>
<tr>
<td>Flavored Beverage, powdered</td>
<td>24</td>
</tr>
<tr>
<td>Flour, all types, in air-tight containers</td>
<td>12</td>
</tr>
<tr>
<td>Pasta, kept tightly closed</td>
<td>24</td>
</tr>
<tr>
<td>Rice, White kept tightly closed</td>
<td>24</td>
</tr>
<tr>
<td>Rice, Mixes</td>
<td>6</td>
</tr>
<tr>
<td>Instant Breakfast, Liquid &amp; Bars, in original packaging or cans</td>
<td>6</td>
</tr>
<tr>
<td>Peanut Butter, unopened</td>
<td>9</td>
</tr>
<tr>
<td>Salt</td>
<td>24</td>
</tr>
<tr>
<td>Soda, Baking Powder</td>
<td>12</td>
</tr>
<tr>
<td>DAY 1</td>
<td>BREAKFAST</td>
</tr>
<tr>
<td>-------</td>
<td>-----------</td>
</tr>
<tr>
<td></td>
<td>Orange Juice, 3/4 c</td>
</tr>
<tr>
<td></td>
<td>Dry Cereal, 3/4 c</td>
</tr>
<tr>
<td></td>
<td>Milk, 1 c</td>
</tr>
<tr>
<td></td>
<td>Sugar, 2 pk(s)</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DAY 2</th>
<th>BREAKFAST</th>
<th>LUNCH</th>
<th>DINNER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Apple Juice, 3/4 c</td>
<td>Macaroni &amp; Cheese, 1 c</td>
<td>Sloppy Joe, 1/2 c</td>
</tr>
<tr>
<td></td>
<td>Dry Cereal, 3/4 c</td>
<td>4 Bean Salad, 1/2 c</td>
<td>on Bread (2) or Taco Shell (2)</td>
</tr>
<tr>
<td></td>
<td>Milk, 1 c</td>
<td>Crackers, 2 pk(s)</td>
<td>Corn, 1/2 c</td>
</tr>
<tr>
<td></td>
<td>Sugar, 2 pk(s)</td>
<td>Peaches, 1/2 c</td>
<td>Tropical Fruit, 1/2 c</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Beverage, 1 c</td>
<td>Milk, 1 c</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>* Snack</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DAY 3</th>
<th>BREAKFAST</th>
<th>LUNCH</th>
<th>DINNER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Orange or Blended Juice, 3/4 c</td>
<td>Bean or Split Pea Soup, 1 c</td>
<td>Chicken &amp; Dumplings, 1 c</td>
</tr>
<tr>
<td></td>
<td>Dry Cereal, 3/4 c</td>
<td>Peanut Butter (2 T) &amp; Jelly</td>
<td>Carrots, 1/2 c</td>
</tr>
<tr>
<td></td>
<td>Milk, 1 c</td>
<td>Bread (2) Graham Crackers (6)</td>
<td>Bread or Crackers 1 slice/2 pk(s)</td>
</tr>
<tr>
<td></td>
<td>Sugar, 2 pk(s)</td>
<td>Apple Raisin Salad, 1/2 c</td>
<td>Fruit Cocktail, 1/2 c</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Pudding, 1/2 c</td>
<td>Milk, 1 c</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Beverage, 1 c</td>
<td>* Snack</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DAY 4</th>
<th>BREAKFAST</th>
<th>LUNCH</th>
<th>DINNER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Apple or Blended Juice, 3/4 c</td>
<td>Tuna Salad, 1/2 c</td>
<td>Beef Ravioli, 1 c</td>
</tr>
<tr>
<td></td>
<td>Dry Cereal, 3/4 c</td>
<td>Potato Salad, 1/2 c</td>
<td>Parmesan Cheese, 2 T</td>
</tr>
<tr>
<td></td>
<td>Milk, 1 c</td>
<td>Bread or Crackers 1 slice/2 pk(s)</td>
<td>Green Beans, 1/2 c</td>
</tr>
<tr>
<td></td>
<td>Sugar, 2 pk(s)</td>
<td>Pineapple, 1/2 c</td>
<td>Bread or Crackers 1 slice/2 pk(s)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Tomato Juice, 1/2 c</td>
<td>Pears, 1/2 c</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Beverage, 1 c</td>
<td>Milk, 1 c</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>* Snack</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DAY 5</th>
<th>BREAKFAST</th>
<th>LUNCH</th>
<th>DINNER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Pineapple or Blended Juice, 3/4 c</td>
<td>Beef Cubes w/BBQ Sauce, 1/2 c</td>
<td>Corned Beef Hash, 1 c</td>
</tr>
<tr>
<td></td>
<td>Dry Cereal, 3/4 c</td>
<td>Baked Beans, 1/2 c</td>
<td>Mixed Vegetables, 1/2 c</td>
</tr>
<tr>
<td></td>
<td>Milk, 1 c</td>
<td>Bread, 2 slices</td>
<td>Bread or Crackers 1 slice/2 pk(s)</td>
</tr>
<tr>
<td></td>
<td>Sugar, 2 pk(s)</td>
<td>Tropical Fruit, 1/2 c</td>
<td>Applesauce, 1/2 c</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Beverage, 1 c</td>
<td>Milk, 1 c</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>* Snack</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DAY 6</th>
<th>BREAKFAST</th>
<th>LUNCH</th>
<th>DINNER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Cranberry or Blended Juice, 3/4 c</td>
<td>Chicken or Tuna Salad, 1/2 c</td>
<td>Chili Con Carne, 1 c</td>
</tr>
<tr>
<td></td>
<td>Dry Cereal, 3/4 c</td>
<td>Crackers, 4 pk(s)</td>
<td>Peas &amp; Carrots, 1/2 c</td>
</tr>
<tr>
<td></td>
<td>Milk, 1 c</td>
<td>Mandarin Oranges, 1/2 c</td>
<td>Bread or Crackers 1 slice/2 pk(s)</td>
</tr>
<tr>
<td></td>
<td>Sugar, 2 pk(s)</td>
<td>Tomato Juice, 1/2 c</td>
<td>Mixed Fruit, 1/2 c</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Cookies, 2</td>
<td>Milk, 1 c</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Beverage, 1 c</td>
<td>* Snack</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DAY 7</th>
<th>BREAKFAST</th>
<th>LUNCH</th>
<th>DINNER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Orange or Blended Juice, 3/4 c</td>
<td>Peanut Butter (2T) &amp; Jelly</td>
<td>Cream Chip Beef, 3/4 c</td>
</tr>
<tr>
<td></td>
<td>Dry Cereal, 3/4 c</td>
<td>Graham Crackers, 6</td>
<td>Diced or Mashed Potatoes, 1/2 c</td>
</tr>
<tr>
<td></td>
<td>Milk, 1 c</td>
<td>Peaches, 1/2 c</td>
<td>4 Bean Salad, 1/2 c</td>
</tr>
<tr>
<td></td>
<td>Sugar, 2 pk(s)</td>
<td>Pudding, 1/2 c</td>
<td>Crackers, 2 pk(s)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Beverage, 1 c</td>
<td>Mixed Fruit, 1/2 c</td>
</tr>
</tbody>
</table>

* One snack per day included in daily menu. Snack should provide one additional bread/starch serving (example: 1 pkg. peanut butter crackers) and one vegetable serving (ex: 4 oz tomato or V-8 juice).
Breakfast Bar may be substituted for dry cereal at Breakfast.